

SERIAL NUMBER 09/402,968	FILING DATE 01/12/00	CLASS 250	GROUP ART UNIT 2878	ATTORNEY DOCKET NO. UD&LP035
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APPLICANT	JOHN PAUL RONALDSON, CALDERBRIDGE, GREAT BRITAIN; ROBERT JONATHAN SHARPE, CALDERBRIDGE, GREAT BRITAIN.			
	<b>**CONTINUING DOMESTIC DATA*****</b> VERIFIED  			
	<b>**371 (NAT'L STAGE) DATA*****</b> VERIFIED      THIS APPLN IS A 371 OF      PCT/GB98/01397      05/15/98  			
	<b>**FOREIGN APPLICATIONS*****</b> VERIFIED      GREAT BRITAIN      9710489.7      05/22/97  			

  

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 02/03/00

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY GB3	SHEETS DRAWING 5	TOTAL CLAIMS 29	INDEPENDENT CLAIMS 2
Verified and Acknowledged Examiner's Initials _____ Initials _____					

  

ADDRESS	SEE CUSTOMER NUMBER: 022434			
	MONITORING AND ANALYSIS			
TITLE				

  

FILING FEE RECEIVED  \$1,132	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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*Jones,*  
*H*  
*2128*

SERIAL NUMBER 09/402,968	FILING DATE 01/12/00	CLASS 250 703	GROUP ART UNIT 2878 2128	ATTORNEY DOCKET NO. UD&LP035
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APPLICANT

JOHN PAUL RONALDSON, CALDERBRIDGE, GREAT BRITAIN; ROBERT JONATHAN SHARPE, CALDERBRIDGE, GREAT BRITAIN.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
VERIFIED

none RJ

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*

VERIFIED THIS APPLN IS A 371 OF PCT/GB98/01397 05/15/98

true RJ

\*\*FOREIGN APPLICATIONS\*\*\*\*\*

VERIFIED GREAT BRITAIN 9710489.7 05/22/97

true RJ

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 02/03/00

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY GB3	SHEETS DRAWING 5	TOTAL CLAIMS 29	INDEPENDENT CLAIMS 2
Verified and Acknowledged	Examiner's Initials	Initials			

SEE CUSTOMER NUMBER: 022434

ADDRESS

TITLE

MONITORING AND ANALYSIS

FILING FEE RECEIVED \$1,132	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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